

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 1 OF 26
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) CONSERVATIVE MAJORITY FUND			FEC IDENTIFICATION NUMBER ▼ C C00524454		
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y					
Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP			Date M M / D D / Y Y Y Y Y Y 08 / 27 / 2012		
Mailing Address 325 SPRINGSIDE DR			Amount 861.33		
City AKRON		State OH	Zip Code 44321		Transaction ID : SE.4904
Purpose of Expenditure VOTER CONTACT CALLS		Category/ Type 004		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: AL District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure: BARAK HUSSEIN OBAMA				Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 861.33			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶		
Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP			Date M M / D D / Y Y Y Y Y Y 08 / 27 / 2012		
Mailing Address 325 SPRINGSIDE DR			Amount 125.20		
City AKRON		State OH	Zip Code 44321		Transaction ID : SE.4905
Purpose of Expenditure VOTER CONTACT CALLS		Category/ Type 004		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: AK District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure: BARAK HUSSEIN OBAMA				Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 125.20			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			986.53		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶					
<p>Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.</p> <p style="text-align: center;">SCOTT B MACKENZIE</p> <p style="text-align: center;">[Electronically Filed]</p> <p>Signature _____ Date M M / D D / Y Y Y Y Y Y 08 / 28 / 2012</p>					

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

CONSERVATIVE MAJORITY FUND

FEC IDENTIFICATION NUMBER ▼

C

C00524454

Check If ☒ 24-hour report ☐ 48-hour report☒ New report ☐ Amends report filed on

M M M /

D D D /

Y Y Y Y Y Y

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

M M M /

D D D /

Y Y Y Y Y Y

Mailing Address 325 SPRINGSIDE DR

City

AKRON

State

OH

Zip Code

44321

Amount

1138.27

Transaction ID : SE.4906

Purpose of Expenditure
VOTER CONTACT CALLSCategory/
Type

004

Office Sought:

☐ House

State: AZ

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election
for Office Sought

1138.27

Disbursement For: ☐ Primary☒ General2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

M M M /

D D D /

Y Y Y Y Y Y

Mailing Address 325 SPRINGSIDE DR

City

AKRON

State

OH

Zip Code

44321

Amount

521.99

Transaction ID : SE.4907

Purpose of Expenditure
VOTER CONTACT CALLSCategory/
Type

004

Office Sought:

☐ House

State: AR

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election
for Office Sought

521.99

Disbursement For: ☐ Primary☒ General2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶

1660.26

(b) SUBTOTAL of Unitemized Independent Expenditures ▶

(c) TOTAL Independent Expenditures..... ▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SCOTT B MACKENZIE

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y

Signature

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 3 OF 26
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

CONSERVATIVE MAJORITY FUND

FEC IDENTIFICATION NUMBER ▼

C C00524454

Check If ☒ 24-hour report ☐ 48-hour report☒ New report ☐ Amends report filed on

M M / D D / Y Y Y Y Y Y

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

M M / D D / Y Y Y Y Y Y
08 / 27 / 2012

Mailing Address 325 SPRINGSIDE DR

Amount

6659.86

City

AKRON

State

OH

Zip Code

44321

Transaction ID : SE.4908

Purpose of Expenditure
VOTER CONTACT CALLSCategory/
Type

004

Office Sought:

☐ House

State: CA

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election
for Office Sought

6659.86

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

M M / D D / Y Y Y Y Y Y
08 / 27 / 2012

Mailing Address 325 SPRINGSIDE DR

Amount

910.80

City

AKRON

State

OH

Zip Code

44321

Transaction ID : SE.4909

Purpose of Expenditure
VOTER CONTACT CALLSCategory/
Type

004

Office Sought:

☐ House

State: CO

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election
for Office Sought

910.80

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

7570.66

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶

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SCOTT B MACKENZIE

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
08 / 28 / 2012

Signature

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 4 OF 26
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

CONSERVATIVE MAJORITY FUND

FEC IDENTIFICATION NUMBER ▼

C

C00524454

Check If ☒ 24-hour report ☐ 48-hour report☒ New report ☐ Amends report filed on

M M M /

D D D /

Y Y Y Y Y Y Y Y

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

Mailing Address 325 SPRINGSIDE DR

City
AKRONState
OHZip Code
44321

Amount

650.85

Transaction ID : SE.4910

Purpose of Expenditure
VOTER CONTACT CALLSCategory/
Type 004

Office Sought:

☐ House

State: CT

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election
for Office Sought

650.85

Disbursement For: ☐ Primary☒ General2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

Mailing Address 325 SPRINGSIDE DR

City
AKRONState
OHZip Code
44321

Amount

164.61

Transaction ID : SE.4911

Purpose of Expenditure
VOTER CONTACT CALLSCategory/
Type 004

Office Sought:

☐ House

State: DE

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election
for Office Sought

164.61

Disbursement For: ☐ Primary☒ General2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

815.46

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶

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SCOTT B MACKENZIE

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

Signature

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 5 OF 26
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

CONSERVATIVE MAJORITY FUND

FEC IDENTIFICATION NUMBER ▼

C C00524454

Check If ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on

MM / DD / YYYY

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

MM / DD / YYYY

Mailing Address 325 SPRINGSIDE DR

Amount

3529.85

City

AKRON

State

OH

Zip Code

44321

Transaction ID : SE.4912

Purpose of Expenditure
VOTER CONTACT CALLSCategory/
Type 004

Office Sought:

☐ House

State: FL

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election
for Office Sought

3529.85

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

MM / DD / YYYY

Mailing Address 325 SPRINGSIDE DR

Amount

1716.60

City

AKRON

State

OH

Zip Code

44321

Transaction ID : SE.4913

Purpose of Expenditure
VOTER CONTACT CALLSCategory/
Type 004

Office Sought:

☐ House

State: GA

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election
for Office Sought

1716.60

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

5246.45

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SCOTT B MACKENZIE

[Electronically Filed]

Date

MM / DD / YYYY

Signature

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 6 OF 26
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) CONSERVATIVE MAJORITY FUND			FEC IDENTIFICATION NUMBER ▼ C C00524454		
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y Y Y					
Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP			Date M M / D D / Y Y Y Y Y Y Y Y 08 / 27 / 2012		
Mailing Address 325 SPRINGSIDE DR			Amount 250.79		
City AKRON State OH Zip Code 44321		Transaction ID : SE.4914			
Purpose of Expenditure VOTER CONTACT CALLS		Category/ Type 004		Office Sought: <input type="checkbox"/> House State: HI <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: BARAK HUSSEIN OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			
Calendar Year-To-Date Per Election for Office Sought 250.79			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶		
Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP			Date M M / D D / Y Y Y Y Y Y Y Y 08 / 27 / 2012		
Mailing Address 325 SPRINGSIDE DR			Amount 271.10		
City AKRON State OH Zip Code 44321		Transaction ID : SE.4915			
Purpose of Expenditure VOTER CONTACT CALLS		Category/ Type 004		Office Sought: <input type="checkbox"/> House State: ID <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: BARAK HUSSEIN OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			
Calendar Year-To-Date Per Election for Office Sought 271.10			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures.....▶			521.89		
(b) SUBTOTAL of Unitemized Independent Expenditures▶					
(c) TOTAL Independent Expenditures.....▶					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature SCOTT B MACKENZIE		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y Y Y 08 / 28 / 2012	

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 7 OF 26
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) CONSERVATIVE MAJORITY FUND		FEC IDENTIFICATION NUMBER ▼ C C00524454	
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP		Date MM / DD / YYYY 08 / 27 / 2012	
Mailing Address 325 SPRINGSIDE DR		Amount 2289.74	
City AKRON	State OH	Zip Code 44321	Transaction ID : SE.4916
Purpose of Expenditure VOTER CONTACT CALLS		Category/ Type 004	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: IL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: BARAK HUSSEIN OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 2289.74		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP		Date MM / DD / YYYY 08 / 27 / 2012	
Mailing Address 325 SPRINGSIDE DR		Amount 1152.78	
City AKRON	State OH	Zip Code 44321	Transaction ID : SE.4917
Purpose of Expenditure VOTER CONTACT CALLS		Category/ Type 004	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: IN District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: BARAK HUSSEIN OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1152.78		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	3442.52
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SCOTT B MACKENZIE

[Electronically Filed]

Signature

Date

MM / DD / YYYY
08 / 28 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 8 OF 26
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) CONSERVATIVE MAJORITY FUND			FEC IDENTIFICATION NUMBER ▼ C C00524454		
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y					
Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP			Date 08 / 27 / 2012		
Mailing Address 325 SPRINGSIDE DR			Amount 547.87		
City AKRON		State OH	Zip Code 44321		Transaction ID : SE.4918
Purpose of Expenditure VOTER CONTACT CALLS		Category/ Type 004		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: IA District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure: BARAK HUSSEIN OBAMA				Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 547.87			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶		
Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP			Date 08 / 27 / 2012		
Mailing Address 325 SPRINGSIDE DR			Amount 503.20		
City AKRON		State OH	Zip Code 44321		Transaction ID : SE.4919
Purpose of Expenditure VOTER CONTACT CALLS		Category/ Type 004		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: KS District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure: BARAK HUSSEIN OBAMA				Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 503.20			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures.....▶			1051.07		
(b) SUBTOTAL of Unitemized Independent Expenditures▶					
(c) TOTAL Independent Expenditures.....▶					
<p>Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.</p> <p style="text-align: center;">SCOTT B MACKENZIE</p> <p style="text-align: center;">[Electronically Filed]</p> <p>Signature _____ Date 08 / 28 / 2012</p>					

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 9 OF 26
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

CONSERVATIVE MAJORITY FUND

FEC IDENTIFICATION NUMBER ▼

C C00524454

Check If ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on

MM / DD / YYYY

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

MM / DD / YYYY

Mailing Address 325 SPRINGSIDE DR

Amount

784.65

City

AKRON

State

OH

Zip Code

44321

Transaction ID : SE.4920

Purpose of Expenditure
VOTER CONTACT CALLSCategory/
Type 004

Office Sought:

☐ House

State: KY

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election
for Office Sought

784.65

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

MM / DD / YYYY

Mailing Address 325 SPRINGSIDE DR

Amount

810.02

City

AKRON

State

OH

Zip Code

44321

Transaction ID : SE.4921

Purpose of Expenditure
VOTER CONTACT CALLSCategory/
Type 004

Office Sought:

☐ House

State: LA

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election
for Office Sought

810.02

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

1594.67

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SCOTT B MACKENZIE

[Electronically Filed]

Date

MM / DD / YYYY

Signature

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) CONSERVATIVE MAJORITY FUND		FEC IDENTIFICATION NUMBER ▼ C C00524454	
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		M M M / D D D / Y Y Y Y Y Y	
Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP		Date M M M / D D D / Y Y Y Y Y Y 08 / 27 / 2012	
Mailing Address 325 SPRINGSIDE DR		Amount 248.16	
City AKRON	State OH	Zip Code 44321	Transaction ID : SE.4922
Purpose of Expenditure VOTER CONTACT CALLS	Category/ Type 004	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: ME District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure: BARAK HUSSEIN OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 248.16		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	
Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP		Date M M M / D D D / Y Y Y Y Y Y 08 / 27 / 2012	
Mailing Address 325 SPRINGSIDE DR		Amount 1050.22	
City AKRON	State OH	Zip Code 44321	Transaction ID : SE.4923
Purpose of Expenditure VOTER CONTACT CALLS	Category/ Type 004	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: MD District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure: BARAK HUSSEIN OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1050.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶		1298.38	
(b) SUBTOTAL of Unitemized Independent Expenditures ▶			
(c) TOTAL Independent Expenditures..... ▶			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature <u>SCOTT B MACKENZIE</u>		Date 08 / 28 / 2012	
[Electronically Filed]			

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 11 OF 26
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

CONSERVATIVE MAJORITY FUND

FEC IDENTIFICATION NUMBER ▼

C C00524454

Check If ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on

MM / DD / YYYY

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

MM / DD / YYYY

Mailing Address 325 SPRINGSIDE DR

Amount

1214.46

City

AKRON

State

OH

Zip Code

44321

Transaction ID : SE.4924

Purpose of Expenditure
VOTER CONTACT CALLSCategory/
Type 004

Office Sought:

☐ House

State: MA

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election
for Office Sought

1214.46

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

MM / DD / YYYY

Mailing Address 325 SPRINGSIDE DR

Amount

1776.36

City

AKRON

State

OH

Zip Code

44321

Transaction ID : SE.4925

Purpose of Expenditure
VOTER CONTACT CALLSCategory/
Type 004

Office Sought:

☐ House

State: MI

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election
for Office Sought

1776.36

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

2990.82

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SCOTT B MACKENZIE

[Electronically Filed]

Date

MM / DD / YYYY

Signature

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 12 OF 26
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

CONSERVATIVE MAJORITY FUND

FEC IDENTIFICATION NUMBER ▼

C

C00524454

Check If ☒ 24-hour report ☐ 48-hour report☒ New report ☐ Amends report filed on

M M M /

D D D /

Y Y Y Y Y Y

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

M M M /

D D D /

Y Y Y Y Y Y

Mailing Address 325 SPRINGSIDE DR

City

AKRON

State

OH

Zip Code

44321

Amount

953.13

Transaction ID : SE.4926

Purpose of Expenditure
VOTER CONTACT CALLSCategory/
Type

004

Office Sought:

☐ House

State: MN

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election
for Office Sought

953.13

Disbursement For: ☐ Primary☒ General2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

M M M /

D D D /

Y Y Y Y Y Y

Mailing Address 325 SPRINGSIDE DR

City

AKRON

State

OH

Zip Code

44321

Amount

522.17

Transaction ID : SE.4927

Purpose of Expenditure
VOTER CONTACT CALLSCategory/
Type

004

Office Sought:

☐ House

State: MS

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election
for Office Sought

522.17

Disbursement For: ☐ Primary☒ General2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

1475.30

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SCOTT B MACKENZIE

[Electronically Filed]

Date

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Y Y Y Y Y Y

Signature

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 13 OF 26
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) CONSERVATIVE MAJORITY FUND		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00524454</div>	
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div>			
Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">08 / 27 / 2012</div>	
Mailing Address 325 SPRINGSIDE DR		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">1077.61</div>	
City AKRON	State OH	Zip Code 44321	Transaction ID : SE.4928
Purpose of Expenditure VOTER CONTACT CALLS	Category/ Type 004	Office Sought: <input type="checkbox"/> House State: MO <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: BARAK HUSSEIN OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">1077.61</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	
Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">08 / 27 / 2012</div>	
Mailing Address 325 SPRINGSIDE DR		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">181.81</div>	
City AKRON	State OH	Zip Code 44321	Transaction ID : SE.4929
Purpose of Expenditure VOTER CONTACT CALLS	Category/ Type 004	Office Sought: <input type="checkbox"/> House State: MT <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: BARAK HUSSEIN OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">181.81</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures.....▶		<div style="border: 1px solid black; padding: 2px; display: inline-block;">1259.42</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures▶		<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
(c) TOTAL Independent Expenditures.....▶		<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature SCOTT B MACKENZIE		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">08 / 28 / 2012</div>	
		[Electronically Filed]	

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 14 OF 26
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) CONSERVATIVE MAJORITY FUND		FEC IDENTIFICATION NUMBER ▼ C C00524454	
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP		Date MM / DD / YYYY 08 / 27 / 2012	
Mailing Address 325 SPRINGSIDE DR		Amount 323.99	
City AKRON	State OH	Zip Code 44321	Transaction ID : SE.4930
Purpose of Expenditure VOTER CONTACT CALLS		Category/ Type 004	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: NE District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: BARAK HUSSEIN OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 323.99		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP		Date MM / DD / YYYY 08 / 27 / 2012	
Mailing Address 325 SPRINGSIDE DR		Amount 482.63	
City AKRON	State OH	Zip Code 44321	Transaction ID : SE.4931
Purpose of Expenditure VOTER CONTACT CALLS		Category/ Type 004	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: NV District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: BARAK HUSSEIN OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 482.63		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	806.62
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SCOTT B MACKENZIE

Signature

[Electronically Filed]

Date

MM / DD / YYYY
08 / 28 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 15 OF 26
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) CONSERVATIVE MAJORITY FUND			FEC IDENTIFICATION NUMBER ▼ C C00524454		
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y					
Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP			Date 08 / 27 / 2012		
Mailing Address 325 SPRINGSIDE DR			Amount 243.29		
City AKRON		State OH	Zip Code 44321		Transaction ID : SE.4932
Purpose of Expenditure VOTER CONTACT CALLS		Category/ Type 004		Office Sought: <input type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: BARAK HUSSEIN OBAMA				Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 243.29			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶		
Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP			Date 08 / 27 / 2012		
Mailing Address 325 SPRINGSIDE DR			Amount 1588.42		
City AKRON		State OH	Zip Code 44321		Transaction ID : SE.4933
Purpose of Expenditure VOTER CONTACT CALLS		Category/ Type 004		Office Sought: <input type="checkbox"/> House State: NJ <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: BARAK HUSSEIN OBAMA				Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1588.42			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			1831.71		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶					
<p>Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.</p> <p style="text-align: center;">SCOTT B MACKENZIE</p> <p style="text-align: center;">[Electronically Filed]</p> <p>Signature _____ Date 08 / 28 / 2012</p>					

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 16 OF 26
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

CONSERVATIVE MAJORITY FUND

FEC IDENTIFICATION NUMBER ▼

C

C00524454

Check If ☒ 24-hour report ☐ 48-hour report☒ New report ☐ Amends report filed on

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M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

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M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

Mailing Address 325 SPRINGSIDE DR

City
AKRONState
OHZip Code
44321

Amount

366.22

Transaction ID : SE.4934

Purpose of Expenditure
VOTER CONTACT CALLSCategory/
Type 004

Office Sought:

☐ House

State: NM

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election
for Office Sought

366.22

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

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M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

Mailing Address 325 SPRINGSIDE DR

City
AKRONState
OHZip Code
44321

Amount

3557.05

Transaction ID : SE.4935

Purpose of Expenditure
VOTER CONTACT CALLSCategory/
Type 004

Office Sought:

☐ House

State: NY

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election
for Office Sought

3557.05

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶

3923.27

(b) SUBTOTAL of Unitemized Independent Expenditures ▶

(c) TOTAL Independent Expenditures..... ▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SCOTT B MACKENZIE

[Electronically Filed]

Date

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M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

Signature

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 17 OF 26
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) CONSERVATIVE MAJORITY FUND		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00524454 </div>	
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on			
Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP		Date MM / DD / YYYY 08 / 27 / 2012	
Mailing Address 325 SPRINGSIDE DR		Amount 1726.78	
City AKRON	State OH	Zip Code 44321	
Purpose of Expenditure VOTER CONTACT CALLS		Category/ Type 004	Transaction ID : SE.4936 Office Sought: <input type="checkbox"/> House State: NC <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: BARAK HUSSEIN OBAMA		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		1726.78	
Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP		Date MM / DD / YYYY 08 / 27 / 2012	
Mailing Address 325 SPRINGSIDE DR		Amount 124.85	
City AKRON	State OH	Zip Code 44321	
Purpose of Expenditure VOTER CONTACT CALLS		Category/ Type 004	Transaction ID : SE.4937 Office Sought: <input type="checkbox"/> House State: ND <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: BARAK HUSSEIN OBAMA		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		124.85	
(a) SUBTOTAL of Itemized Independent Expenditures.....		1851.63	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures.....			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature SCOTT B MACKENZIE		Date MM / DD / YYYY 08 / 28 / 2012	
[Electronically Filed]			

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 18 OF 26
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

CONSERVATIVE MAJORITY FUND

FEC IDENTIFICATION NUMBER ▼

C

C00524454

Check If ☒ 24-hour report ☐ 48-hour report☒ New report ☐ Amends report filed on

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D D /

Y Y Y Y Y Y

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

M M /

D D /

Y Y Y Y Y Y

Mailing Address 325 SPRINGSIDE DR

City

AKRON

State

OH

Zip Code

44321

Amount

2074.32

Transaction ID : SE.4938

Purpose of Expenditure
VOTER CONTACT CALLSCategory/
Type

004

Office Sought:

☐ House

State: OH

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election
for Office Sought

2074.32

Disbursement For: ☐ Primary☒ General2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

M M /

D D /

Y Y Y Y Y Y

Mailing Address 325 SPRINGSIDE DR

City

AKRON

State

OH

Zip Code

44321

Amount

669.11

Transaction ID : SE.4939

Purpose of Expenditure
VOTER CONTACT CALLSCategory/
Type

004

Office Sought:

☐ House

State: OK

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election
for Office Sought

669.11

Disbursement For: ☐ Primary☒ General2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

2743.43

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SCOTT B MACKENZIE

[Electronically Filed]

Date

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Y Y Y Y Y Y

Signature

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 19 OF 26
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

CONSERVATIVE MAJORITY FUND

FEC IDENTIFICATION NUMBER ▼

C

C00524454

Check If ☒ 24-hour report ☐ 48-hour report☒ New report ☐ Amends report filed on

M M M /

D D D /

Y Y Y Y Y Y

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

M M M /

D D D /

Y Y Y Y Y Y

Mailing Address 325 SPRINGSIDE DR

City

AKRON

State

OH

Zip Code

44321

Amount

704.91

Transaction ID : SE.4940

Purpose of Expenditure
VOTER CONTACT CALLSCategory/
Type

004

Office Sought:

☐ House

State: OR

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election
for Office Sought

704.91

Disbursement For: ☐ Primary☒ General2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

M M M /

D D D /

Y Y Y Y Y Y

Mailing Address 325 SPRINGSIDE DR

City

AKRON

State

OH

Zip Code

44321

Amount

2339.09

Transaction ID : SE.4941

Purpose of Expenditure
VOTER CONTACT CALLSCategory/
Type

004

Office Sought:

☐ House

State: PA

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election
for Office Sought

2339.09

Disbursement For: ☐ Primary☒ General2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶

3044.00

(b) SUBTOTAL of Unitemized Independent Expenditures ▶

(c) TOTAL Independent Expenditures..... ▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SCOTT B MACKENZIE

Signature

[Electronically Filed]

Date

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24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 20 OF 26
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) CONSERVATIVE MAJORITY FUND		FEC IDENTIFICATION NUMBER ▼ C C00524454	
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP		Date MM / DD / YYYY 08 / 27 / 2012	
Mailing Address 325 SPRINGSIDE DR		Amount 194.91	
City AKRON	State OH	Zip Code 44321	Transaction ID : SE.4942
Purpose of Expenditure VOTER CONTACT CALLS		Category/ Type 004	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: RI District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: BARAK HUSSEIN OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 194.91		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP		Date MM / DD / YYYY 08 / 27 / 2012	
Mailing Address 325 SPRINGSIDE DR		Amount 843.30	
City AKRON	State OH	Zip Code 44321	Transaction ID : SE.4943
Purpose of Expenditure VOTER CONTACT CALLS		Category/ Type 004	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: SC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: BARAK HUSSEIN OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 843.30		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	1038.21
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SCOTT B MACKENZIE

[Electronically Filed]

Signature

Date

MM / DD / YYYY
08 / 28 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 21 OF 26
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

CONSERVATIVE MAJORITY FUND

FEC IDENTIFICATION NUMBER ▼

C

C00524454

Check If ☒ 24-hour report ☐ 48-hour report☒ New report ☐ Amends report filed on

M M /

D D /

Y Y Y Y Y Y

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

M M /

D D /

Y Y Y Y Y Y

Mailing Address 325 SPRINGSIDE DR

City
AKRONState
OHZip Code
44321

Amount

145.51

Transaction ID : SE.4944

Purpose of Expenditure
VOTER CONTACT CALLSCategory/
Type 004

Office Sought:

☐ House

State: SD

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election
for Office Sought

145.51

Disbursement For: ☐ Primary☒ General2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

M M /

D D /

Y Y Y Y Y Y

Mailing Address 325 SPRINGSIDE DR

City
AKRONState
OHZip Code
44321

Amount

1150.88

Transaction ID : SE.4945

Purpose of Expenditure
VOTER CONTACT CALLSCategory/
Type 004

Office Sought:

☐ House

State: TN

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election
for Office Sought

1150.88

Disbursement For: ☐ Primary☒ General2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶

1296.39

(b) SUBTOTAL of Unitemized Independent Expenditures ▶

(c) TOTAL Independent Expenditures..... ▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SCOTT B MACKENZIE

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y Y Y

Signature

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 22 OF 26
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

CONSERVATIVE MAJORITY FUND

FEC IDENTIFICATION NUMBER ▼

C

C00524454

Check If ☒ 24-hour report ☐ 48-hour report☒ New report ☐ Amends report filed on

M M /

D D /

Y Y Y Y Y Y

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

M M /

D D /

Y Y Y Y Y Y

Mailing Address 325 SPRINGSIDE DR

City

AKRON

State

OH

Zip Code

44321

Amount

4385.37

Transaction ID : SE.4946

Purpose of Expenditure
VOTER CONTACT CALLSCategory/
Type

004

Office Sought:

☐ House

State: TX

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election
for Office Sought

4385.37

Disbursement For: ☐ Primary☒ General2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

M M /

D D /

Y Y Y Y Y Y

Mailing Address 325 SPRINGSIDE DR

City

AKRON

State

OH

Zip Code

44321

Amount

453.89

Transaction ID : SE.4947

Purpose of Expenditure
VOTER CONTACT CALLSCategory/
Type

004

Office Sought:

☐ House

State: UT

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election
for Office Sought

453.89

Disbursement For: ☐ Primary☒ General2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶

4839.26

(b) SUBTOTAL of Unitemized Independent Expenditures ▶

(c) TOTAL Independent Expenditures..... ▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SCOTT B MACKENZIE

[Electronically Filed]

Date

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Signature

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 23 OF 26
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

CONSERVATIVE MAJORITY FUND

FEC IDENTIFICATION NUMBER ▼

C

C00524454

Check If ☒ 24-hour report ☐ 48-hour report☒ New report ☐ Amends report filed on

M M M /

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Y Y Y Y Y Y Y

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

M M M /

D D D /

Y Y Y Y Y Y Y

Mailing Address 325 SPRINGSIDE DR

City
AKRONState
OHZip Code
44321

Amount

117.27

Transaction ID : SE.4948

Purpose of Expenditure
VOTER CONTACT CALLSCategory/
Type 004

Office Sought:

☐ House

State: VT

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election
for Office Sought

117.27

Disbursement For: ☐ Primary☒ General☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

M M M /

D D D /

Y Y Y Y Y Y Y

Mailing Address 325 SPRINGSIDE DR

City
AKRONState
OHZip Code
44321

Amount

1462.98

Transaction ID : SE.4949

Purpose of Expenditure
VOTER CONTACT CALLSCategory/
Type 004

Office Sought:

☐ House

State: VA

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election
for Office Sought

1462.98

Disbursement For: ☐ Primary☒ General☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

1580.25

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SCOTT B MACKENZIE

[Electronically Filed]

Date

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Y Y Y Y Y Y Y

Signature

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 24 OF 26
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

CONSERVATIVE MAJORITY FUND

FEC IDENTIFICATION NUMBER ▼

C C00524454

Check If ☒ 24-hour report ☐ 48-hour report☒ New report ☐ Amends report filed on

M M / D D / Y Y Y Y Y Y

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

M M / D D / Y Y Y Y Y Y
08 / 27 / 2012

Mailing Address 325 SPRINGSIDE DR

Amount

1229.87

City
AKRONState
OHZip Code
44321

Transaction ID : SE.4950

Purpose of Expenditure
VOTER CONTACT CALLSCategory/
Type 004Office Sought: ☐ House State: WA
☐ Senate District: 00
☒ PresidentCheck One: ☐ Support ☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election
for Office Sought

1229.87

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

M M / D D / Y Y Y Y Y Y
08 / 27 / 2012

Mailing Address 325 SPRINGSIDE DR

Amount

344.61

City
AKRONState
OHZip Code
44321

Transaction ID : SE.4951

Purpose of Expenditure
VOTER CONTACT CALLSCategory/
Type 004Office Sought: ☐ House State: WV
☐ Senate District: 00
☒ PresidentCheck One: ☐ Support ☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election
for Office Sought

344.61

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

1574.48

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SCOTT B MACKENZIE

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
08 / 28 / 2012

Signature

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 25 OF 26
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) CONSERVATIVE MAJORITY FUND		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00524454 </div>	
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on			
Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP		Date MM / DD / YYYY 08 / 27 / 2012	
Mailing Address 325 SPRINGSIDE DR		Amount 1027.70	
City AKRON	State OH	Zip Code 44321	
Purpose of Expenditure VOTER CONTACT CALLS		Category/ Type 004	Transaction ID : SE.4952 Office Sought: <input type="checkbox"/> House State: WI <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: BARAK HUSSEIN OBAMA		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		1027.70	
Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP		Date MM / DD / YYYY 08 / 27 / 2012	
Mailing Address 325 SPRINGSIDE DR		Amount 101.52	
City AKRON	State OH	Zip Code 44321	
Purpose of Expenditure VOTER CONTACT CALLS		Category/ Type 004	Transaction ID : SE.4953 Office Sought: <input type="checkbox"/> House State: WY <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: BARAK HUSSEIN OBAMA		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		101.52	
(a) SUBTOTAL of Itemized Independent Expenditures.....		1129.22	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures.....			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature SCOTT B MACKENZIE		Date MM / DD / YYYY 08 / 28 / 2012 [Electronically Filed]	

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 26 OF 26
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

CONSERVATIVE MAJORITY FUND

FEC IDENTIFICATION NUMBER ▼

C

C00524454

Check If ☒ 24-hour report ☐ 48-hour report☒ New report ☐ Amends report filed on

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Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

M M /

D D /

Y Y Y Y Y Y

Mailing Address 325 SPRINGSIDE DR

Amount

120.14

City

AKRON

State

OH

Zip Code

44321

Transaction ID : SE.4954

Purpose of Expenditure
VOTER CONTACT CALLSCategory/
Type

004

Office Sought:

☐ House

State: DC

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election
for Office Sought

120.14

Disbursement For: ☐ Primary☒ General☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

Date

M M /

D D /

Y Y Y Y Y Y

Mailing Address

Amount

City

State

Zip Code

Purpose of Expenditure

Category/
Type

Office Sought:

☐ House

State:

☐ Senate

District:

☐ President

Check One:

☐ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Calendar Year-To-Date Per Election
for Office SoughtDisbursement For: ☐ Primary☐ General☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

120.14

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶

55692.04

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SCOTT B MACKENZIE

[Electronically Filed]

Date

M M /

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Y Y Y Y Y Y

Signature